

**Arizona Department of Health Services
Division of Licensing Services
Office of Medical Facilities Licensing
150 N. 18th Avenue, Ste. 450 Phoenix, AZ 85007
400 W. Congress Avenue, Tucson, AZ 85701
Phoenix 602-364-3030; Tucson 520-628-6965**

LICENSED CAPACITY REQUESTED

HOSPITAL _____
Address _____
City, State, Zip _____
Administrator _____
Telephone Number _____

Please indicate the licensed capacity requested for the hospital including the number of inpatient beds for each organized service, not including well-baby bassinets.

Organized Service	Inpatient Beds
Postpartum	
Continuing Care Nursery	
Neonatal Intensive Care (NICU)	
Pediatric	
Pediatric Intensive Care (PICU)	
Medical-Surgical Beds	
Intensive Care (ICU)	
Psychiatric	
Rehabilitation	
Total	

The total number of inpatient beds must match the number on the Initial Application for a Health Care Institution License.